BOBBY JINDAL, Governor

MARY L. LIVERS, Ph.D., MSW, Deputy Secretary

B.8.4 (d)

BAPTISM PERMISSION FORM

(Insert Date)		
TO WHOM IT MAY CONCERN:		
I am (Insert Parent/Guardian First and Last Name), (Insert Youth's Client ID #). (Insert Youth's First Na		
	City Center for Youth (BCCY)
	on Center for Youth (JCY) son Center for Youth (SCY)	
	iter for Youth at Columbia	(SCYC)
I hereby give permission for a licensed and ordained the above facility.	individual to baptize (Inse	rt Youth's First Name) while he is residing at
Youth's Printed Name	Youth's Signature	 Date
Parent/Guardian Signature	Date	
Witness Signature	Date	

(Signature of parent/guardian needed if the youth is <u>under</u> the age of 18)

July 2013